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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*  
*None of*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
*None of*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>Am</i> Examiner's Signature	STATE OR COUNTRY MA	SHEETS DRAWING 10	TOTAL CLAIMS 14	INDEPENDENT CLAIMS 2
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